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TO: Senate Public Health Committee

53 498 FROM: Jennifer Hill-Hart, Montana Coalition Against Domestic and Sexual Violence

DATE: February 21, 2007

RE: SB 498 - SB 498 Plan for universal health care system for all Montanans

Good afternoon, Mr. Chairman and members of the committee. My name is Jennifer Hill-Hart and I represent the Montana Coalition Against Domestic and Sexual Violence. Thank you for the opportunity to provide testimony to you today. We are a membership-based organization representing domestic and sexual violence advocacy programs from across the state of Montana. We support SB 498 as a means to ensure quality health care for all Montanans and further support for victims of domestic and sexual violence.

Domestic violence is a pervasive problem that affects our communities and impacts our health care system in epidemic proportions. Current statistics state that one out of every three women in this country report being abused by a spouse or partner at least once in their lifetime. Each year, victims of domestic violence visit health care providers nearly 700,000 times in response to domestic abuse. 324,000 pregnant women report being abused by their spouse or partner each year with homicide the *leading* cause of death of pregnant women. In addition to the immediate trauma of domestic abuse, domestic violence contributes to chronic health problems of these victims. There is a huge gap in our current health care system's response to domestic violence victims.

22%

Currently, 16.2% of non-elderly Montanans, and one in every six of Montana's children, do not have adequate health care/insurance. These factors largely contribute to the low disclosure and prevention rate of domestic violence. Lack of health insurance often prevents these victims from seeking medical help until the abuse becomes life-threatening and the cost of treatment more expensive.

According to the Center for Disease Control and Prevention, domestic violence costs nearly \$5.8 billion a year, with \$4.1 billion of that figure going to the costs of direct medical and mental health care services. Universal health care has the potential to reduce these figures by ensuring that all victims of domestic abuse have access to adequate health care before the abuse and the subsequent health problems become more severe. With greater access to health care, victims of abuse are more likely to see service providers during early stages of abuse. This allows health care providers greater potential for early detection of abuse which can, in turn, reduce the health care costs of domestic abuse by at least 20%! In fact, in several studies about survivors of abuse, 70 to 81% of the patients indicated that they would like their health care provider to ask them privately if they are victims of domestic abuse. Only 44% of victims of domestic violence actively disclose the abuse to someone and 37% of the time this disclosure is to a health care provider.

Universal health care will give all Montanans just access to health care service by making it affordable. Not only does SB 498 recognize health care as a human right for Montanans, but it will increase the number of victims who are able to visit a health care provider before the abuse warrants emergency care thus decreasing the overall costs of health care and, more importantly, saving lives and supporting healthy families.

MCADSV applauds Senator Kauffman for sponsoring SB 498 as a means to ensure that all Montanans have equal access to health care, particularly because of the vital role the health care system can play in domestic violence prevention and intervention. I think we can all agree that health care is a human right. Please demonstrate that recognition by showing your support for SB 498 and vote to pass it out of committee. Thank you.

Senate Bill 498 – Create a universal health care system

My name is Alex Kraft. I am a 28 year old woman. I have a Master's Degree in Fine Art from the University of MT. This is my fifth year living in MT. After graduating from school, I am no longer covered by the health insurance provided by the university. I currently have catastrophic insurance that I bought online, that I pay roughly \$100 a month for. It doesn't cover my preexisting condition. When I was 25 I found out that I had Multiple Sclerosis. I found out because I became very sick and spent two months in the hospital recovering from paralyzation of the right side of my body along with other symptoms. I am currently healthy, but I always know that there is the potential for relapse and I do not have health insurance that will cover my M.S. I am a ceramic studio artist and also hold day job to pay the bills. In the future I hope to be a college professor, but I am spending several years building my career. I recently was a resident as the Archie Bray Foundation and will be doing future residencies. These are viable for my career, but don't offer health insurance.

Alex Kraft
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SB 498 Plan for a Universal Health Care System for all Montanans

- 22% of our non-elderly population are uninsured
- 90% of uninsured kids come from a working family 1
- Insurance costs have grown much faster than workers' earning or the rate of inflation
- Health insurance costs are taxing Montanan businesses
- Our current health care system is bad for individuals, businesses, and our communities

SB 498:

- Would create a group that would figure out the <u>best way</u> to get all Montanans access to quality, affordable, health care
- The group would report back to the legislature and have accountability

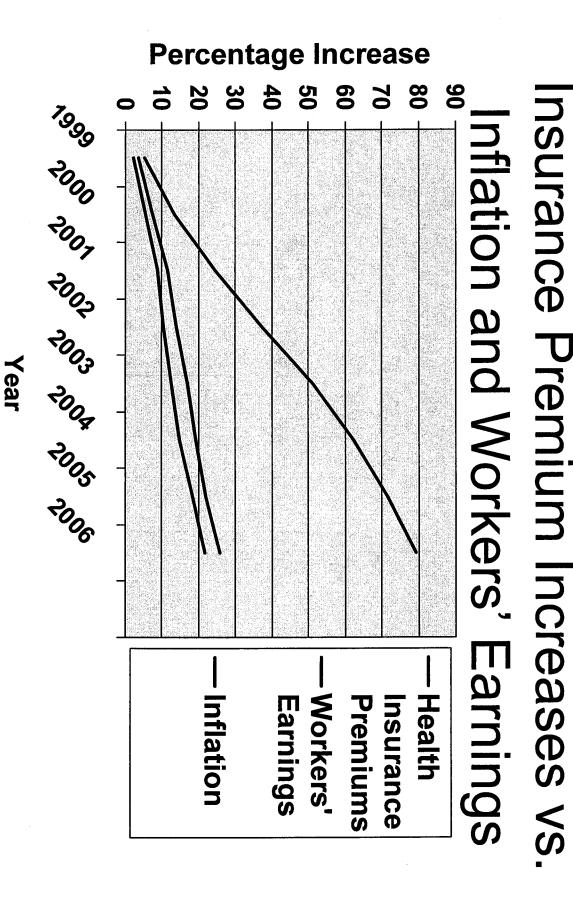
Montanans believe that we have a broken health care system that cannot be fixed and must be replaced by a universal system²

Support all Montanans by ensuring that everyone has access to health care!

For More Information Contact: Olivia Riutta, 465-5145, oriutta@weelempowers.org

¹ No Shelter from the Storm, America's Uninsured Children, Campaign for Children's Health Care, September 2006

² Seninger, Steve, PhD, Key Informant Interview of Health Care Access and Insurance in Montana, The University of MT, August 2003



In 2006, the average annual premium for employer-sponsored coverage reached \$11,480 for a family of four

How Much Does Insurance Cost for Montana Families?

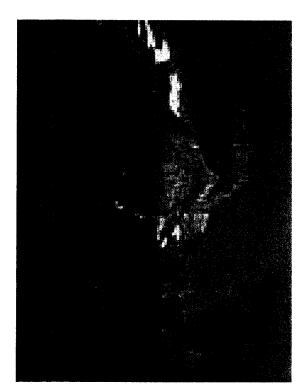
Insurance Costs 32% of the Median Family* Income in Montana

for family coverage have increased 87% Since 2000, health insurance premiums

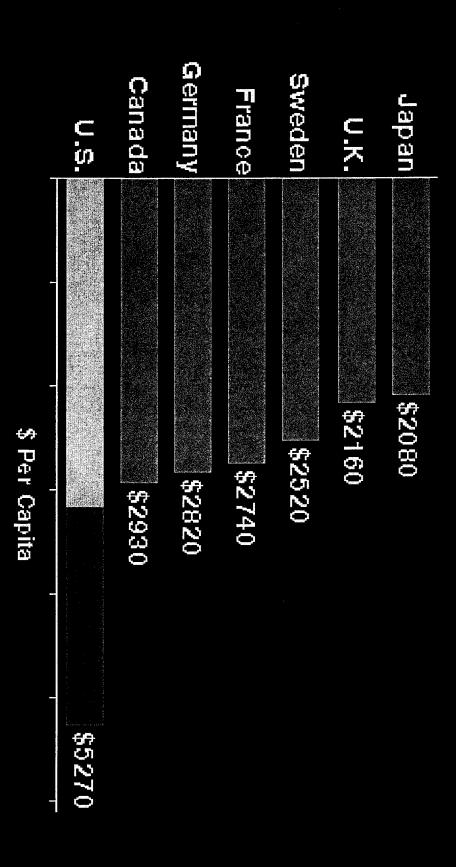
What do Montanans Say?

- Health insurance costs too much
- The system is broken and can't be fixed
- Universal, single-payer is the only way to replace the current system

Stephen Seninger PhD
Director of Economic Analysis
The University of Montana
Final Report: Key Informant Interview of
Health Care Access & Insurance in
Montana, August 2003



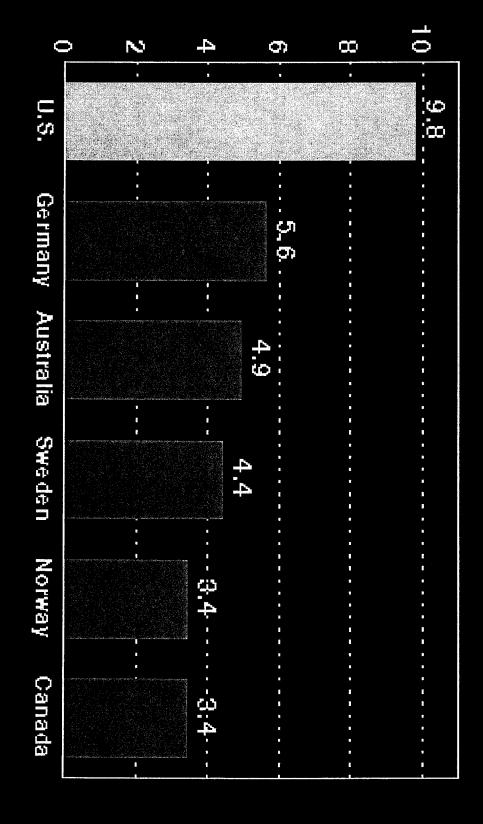
is Creater than TOTAL Spending in Other Nations U.S. PUBLIC Spending Per Capita for Health



Note: Public includes benefit costs for govt. employees & tax subsidy for private insurance

📉 Total Spending 🔤 U.S. Public 🔝 U.S. Private

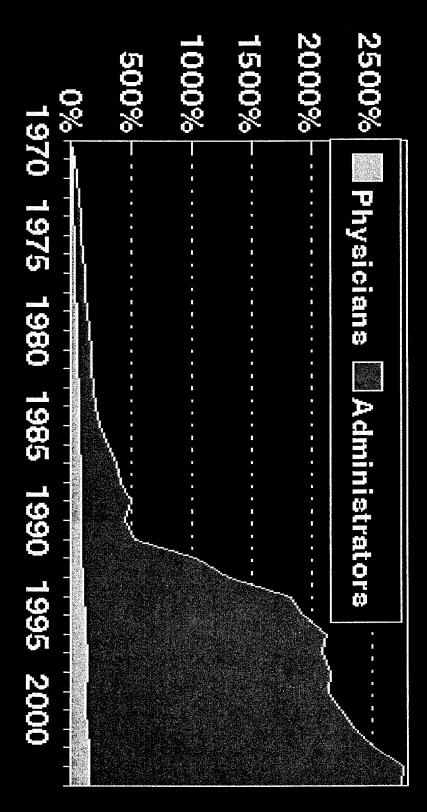
Source: OECD 2004; Health Aff 2002; 21(4):88 - Data are for 2002



Source: OECD, 2003 - Note data for Germany, Sweden and Canada are for 2000

SROWIH OF PHYSICIANS & ADMINISTRATORS 1970-2004

GROWTH SINCE 1970



Source: Bureau of Labor Statistics; NCHS; and analysis of CPS